ORIGINAL ARTICLES

Scientific and General

PSYCHOGENIC FACTORS IN OBSTETRICS AND GYNECOLOGY*

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THIS symposium on Psychogenic Factors in Obstetrics and Gynecology, has been arranged in response to a specific need for information in the field of psychoneuroses and psycho-therapy. The physician has always been aware that his medicine and surgery were often of secondary importance in affording relief to his patient. He knew that in a high percentage of his patients his intuitive understanding of their problems, their confidence in his wisdom and sympathy, and the freedom they enjoyed to disclose the hidden conflicts of their lives worked cures in some magical way.

Why has this unique patient-physician relationship been so effective as a therapeutic measure? Like so many remarkable phenomena surrounding us we have taken this particularly significant one for granted and failed to bring to bear upon it the analysis and study it deserved. The startling relief from symptoms experienced by patients after they have unburdened themselves to their confidant, the doctor, of secret unendurable conflicts, should have made us all suspect that a vital relationship of cause and effect existed in the conflict and the symptom. If we can, therefore, accept this relationship as valid, it would seem reasonable to take another step. If we can accept the theory that it is possible for a patient to suffer from conflicts unrecognized by him, of which he is completely unconscious because recognition would be too painful and disturbing we may then account for symptoms for which even the close physician-patient relationship may offer no relief.

FREUD'S CONTRIBUTIONS

It was in this field of the unconscious conflict that Freud made his monumental contribution to human psychology. He pointed the way to a scientific instead of an intuitive understanding of the results obtained by the physician and developed a technique for the unearthing of the hidden conflict. But as so often happens in the history of science, his psychology and therapy met with profound suspicion and resistance, for he substituted science for magic; just as Holmes and Semmelweiss substituted bacteriology for miasmas and faced the scorn of their colleagues.

There was a time in the history of medicine when, says Freud, "dissecting human corpses in order to discover the internal structure of the body was as much a matter for severe prohibition as practicing psycho-analysis, in order to discover the internal workings of the human mind, seems today to be a matter for condemnation."1 This was written twenty-five years ago but still today in some medical circles the soundness of Freud's work is questioned. The explanation of this scepticism is perhaps that few of us are without some neurotic tendencies and that acceptance of Freud's psychology tends to make us aware of them, always a disagreeable experience. Add to this the disturbance of our profound belief in the infallibility of our chemical and physical science

and our hereditary religious and ethical concepts, and it is not too surprising that we turn with fierce resentment against this new concept which asks us to re-educate ourselves, take a new point of view and a re-orientation in medical philosophy. Oddly enough the most violent scoffer is most often the most poorly informed. He has probably never read Freud's introductory lectures, which, by the way, are examples almost without equal, of clear and logical writing capable of holding the interest of students to the end.

This lack of familiarity with a mental-therapeutic science considered by many to be as fundamental to medicine as physiology and anatomy, is however, being slowly corrected. Medical schools are incorporating psycho-analysis in their curricula and even popular magazines are bringing more and sounder information to the lay public. The war with all its trauma to minds as well as bodies has increased this interest.

These then are some of the reasons for this symposium. It is an attempt to offer some fundamental information and points of view for approach to the problems that we must all face with increasing frequency, so that we may more efficiently offer help, and perhaps cure to that large group of desperate people who wander from doctor to quack seeking a relief that can never be achieved by drug or surgery, but only by understanding.

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REFERENCE

1. Sigmund Freud. A General Introduction to Psycho-

PSYCHOGENIC FACTORS IN OBSTETRICS*

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T has become apparent that in the discussion of the sathma, and colitis, the "emotional factor" is very im-T has become apparent that in diseases such as ulcers, portant, perhaps the entire etiology. Since pregnancy, labor, and the puerperium are considered "normal processes," the profound emotional changes which take place are too often overlooked or made light of. The obstetrician must deal with three situations:

- 1. The prolonged period of pregnancy.
- The acute period of labor and delivery.
- The indeterminate postpartum period.

The fact that this involves approximately one year of the patient's life is in itself significant for the development of psychological stresses. Obstetricians are becoming more aware of these factors in their patients. Since a patient may express one attitude and at the same time harbor an opposite one, we see conflicts arising. Many women consciously have no desire for children; others have unconscious aversions to pregnancy, but express conscious desires. In both cases the conflict results in a psychological and physiological reaction.

A WOMAN'S ATTITUDE CONCERNING PREGNANCY

A woman's attitude toward pregnancy is based on early sex education, satisfactory sexual adjustment, and a desire for a child. If pregnancy occurs shortly after marriage or too soon after a previous pregnancy, in a family not financially secure, there naturally arises an antagonism towards the child and an unconscious rejection of it. The woman who does not want a child is thought to have rejected the feminine rôle. A truly normally adjusted woman does not reject pregnancy.

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Ed. Note.—Many references were given, but not being keyed in text, are not printed.